FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES **PURSUANT TO REGULATION D,** SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

i	1366	OMB APPROVAL

3235-0076 OMB Number:

April 30, 2008

Expires Estimated average burden

16.00 hours per response:

SEC USE ONLY							
Prefix	Serial						
DAT	E RECEIVED						

Name of Offering (check if this is an amendment Vontobel: Non-US Equity LLC: Limited Liability		
Filing Under (Check box(es) that apply): Rul		Secritor (6) The Carlot State of the Carlot St
Type of Filing: ☐ New Filing ☑ Amendme	nt	
	A. BASIC IDENTIFICATION DATA	DEC 1 8 2007
1. Enter the information requested about the issuer		
Name of Issuer (check if this is an amendment	t and name has changed, and indicate change.)	188
Vontobel: Non-US Equity LLC		**\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	ber and Street, City, State Zip Code)	Telephone Number (including Area Code)
One New York Plaza, New York, New York	10004	(212) 902-1000
	imber and Street, City, State and Zip Code)	Telephone Nur
(if different from Executive Offices)	PROCESSED	
Brief Description of Business		
To operate as a private investment fund.	√ DEC 3 1 2007	1 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	\	07086948
Type of Business Organization	THOMSON	
□ corporation □	limited partnership, al FINANCIAL	other (please specify):
☐ business trust L	limited partnership, to be formed	Limited Liability Company
	Month Year	
Actual or Estimated Date of Incorporation or Organ		☑ Actual ☐ Estimated
·		vian for
Jurisdiction of Incorporation or Organization:	(Enter two-letter U.S. Postal Service abbrevia: State: CN for Canada; FN for other foreign jur	
	State. Civ for Canada, 1 iv for other foreign jur	() () () () () () () () () ()
GENERAL INSTRUCTIONS		

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collections of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDEN	FIFICATION DATA		
2. Enter the information requested for the following:			
* Each promoter of the issuer, if the issuer has been organized v	within the past five years;		
 Each beneficial owner having the power to vote or dispose, or of the issuer; 	direct the vote or disposition of, 10% or n	nore (of a class of equity securities
* Each executive officer and director of corporate issuers and o	f corporate general and managing partners	of pa	rtnership issuers; and
* Each general and managing partner of partnership issuers.			
Check Box(es) that Apply: □ Promoter □ Beneficial Owner	☐ Executive Officer ☐ Director	Ø	General and/or Managing Partner
Full Name (Last name first, if individual)			
Goldman Sachs Asset Management, L.P. (the Issuer's Managing M	ember)	,	
Business or Residence Address (Number and Street, City, State, Zip	Code)		
One New York Plaza, New York, New York 10004			
Check Box(es) that Apply: Promoter Beneficial Owner	 ✓ Executive Officer* □ Director * of the Issuer's Managing Member 		General and/or Managing Partner
Full Name (Last name first, if individual)			
Aakko, Markus			· <u></u>
Business or Residence Address (Number and Street, City, State, Zip	Code)		
One New York Plaza, New York, New York 10004			•
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner	 ✓ Executive Officer* ☐ Director * of the Issuer's Managing Member 		General and/or Managing Partner
Full Name (Last name first, if individual)			
Gottlieb, Jason			· · · · · · · · · · · · · · · · · · ·
Business or Residence Address (Number and Street, City, State, Zip	Code)		
One New York Plaza, New York, New York 10004			<u> </u>
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner	✓ Executive Officer* ☐ Director * of the Issuer's Managing Member		General and/or Managing Partner
Full Name (Last name first, if individual)			
Kelly, Edward			
Business or Residence Address (Number and Street, City, State, Zip	Code)		
One New York Plaza, New York, New York 10004			
Check Box(cs) that Apply: ☐ Promoter ☐ Beneficial Owner	 ✓ Executive Officer* ☐ Director * of the Issuer's Managing Member 		General and/or Managing Partner
Full Name (Last name first, if individual)			
Kramer, J. Douglas			· · · · · · · · · · · · · · · · · · ·
Business or Residence Address (Number and Street, City, State, Zip	Code)		
One New York Plaza, New York, New York 10004			
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner	 ✓ Executive Officer* ☐ Director * of the Issuer's Managing Member 		General and/or Managing Partner
Full Name (Last name first, if individual)			
Ross, Hugh M.			<u>-</u>
Business or Residence Address (Number and Street, City, State, Zip	Code)		
One New York Plaza, New York, New York 10004			
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner	✓ Executive Officer* □ Director * of the Issuer's Managing Member		General and/or Managing Partner

Full Name (Last name first, if individual)

One New York Plaza, New York, New York 10004

Business or Residence Address (Number and Street, City, State, Zip Code)

Wade, Matthew

				B. INI	ORMAT	ION ABO	UT OFFI	ERING				
											Yes	No
1. Has the	e issuer sold	l, or does th	e issuer inte							***************************************		Ø
			A	inswer also	in Appendi	x, Column	2, if filing u	inder ULOE	i.			
2. What is the minimum investment that will be accepted from any individual?								\$	*			
	_	er may in i	ts sole disc	retion acce	pt subscrip	tion amour	its in whate	ever amoun	t it determ	ines is	Yes	No
acceptable 3 Does the	e. he offering :	nermit ioint	ownership	of a single	unit?						\square	
 3. Does the offering permit joint ownership of a single unit? 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any 												
commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering.												
If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such												
			proker or a ct forth the i					u are associ	ated person	s or such		
Full Name					•				. :	·		
Goldman,	Sachs & C	0.*										
_			sold throug	gh Goldma	n, Sachs &	Co., no coi	nmissions v	will be paid	, directly o	r indirectly	, for solicit	ing any
Purchaser Business o	in any juri r Residence	isdiction.	Number and	Street City	/ State Zin	Code)						
Dusiness o	Residence	71441633 (1	varioer and	Bir cot, 611,	,, o.u.e, 2.p	0000)						
	Street, New ssociated B		w York 100	004						-		
Name of A	ssociated b	roker or De	aier									
			s Solicited (☑ A	ll States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	(ID)
[IL]	[N]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last name	first, if ind	ividual)	·								
Business o	r Residence	Address (1	Number and	Street, City	y, State, Zip	Code)						
Name of A	ssociated B	roker or De	ealer									
States in W	Vhich Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	rchasers						
			lividual Stat								🗆 Al	l States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	(OH)	[OK]	[OR]	[PA]
[RI]	[SC] (Last name	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
run Name	(Last name	: HFSI, H ING	ividuai)									
Rusiness	r Residence	Address (1	Number and	Street City	V State Zin	Code)		-		~~		<u> </u>
243111433	T T T T T T T T T T T T T T T T T T T				,,,	,						
Name of A	ssociated B	roker or Do	ealer									
			s Solicited lividual Stat									All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[บา]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of					
	the securities offered for exchange and already exchanged.		Aggregate Offering Price			Amount Already Sold
	Type of Security Debt	Q	0	5	:	0
	Equity	_		S		0
	• •	³ –	0	J	'—	
	☐ Common ☐ Preferred	¢	0	•	:	0
	Convertible Securities (including warrants)	-			· —	
	•				' — S	
	Other (Specify): Limited Liability Company Units	-			' — 5 _	
	Total	³-	459,507,000		<i>'</i> —	439,307,000
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."					Aggregate
			Number Investors			Dollar Amount of Purchases
	Accredited Investors	_	228	\$	_	459,507,000
	Non-accredited Investors	_	0	. \$	<u> </u>	0
	Total (for filings under Rule 504 only)	_	N/A	. 9	; 	N/A
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.					
	Type of offering		Type of Security			Dollar Amount Sold
	Rule 505		N/A	9	5	N/A
	Regulation A	-	N/A	•	· —	N/A
	Rule 504	-	N/A	•	- 5	N/A
	Total	_	N/A	. `	_	N/A
ti ti	i.a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of the expenditure is not known, furnish an estimate and check the box to the left of the estimate.	_		•		
	Transfer Agent's Fees			5	· _	0
	Printing and Engraving Costs			5	· _	0
	Legal Fees		Ø	9	§ _	71,877
	Accounting Fees			5	^լ _	0
	Engineering Fees.			5	§ _	0
	Sales Commissions (specify finders' fees separately)			9	§ _	0
	Other Expenses (identify)			5	§ _	0
	Total		Ø		\$_	71,877

	C. OFFERING PRICE, NUMBE	ER OF INVESTORS, EXP	ENS	ES A	ND USE OF P	ROCE	ED <u>S</u>			
5.	b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."							459,435,123		
J.	to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b. above.									
					Payments to Officers, Directors, & Affiliates			Payments To Others		
	Salaries and Fees	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		\$_	0	_ □	\$_	0		
	Purchase of real estate			\$_	0	_ 🗆	\$_	0		
	Purchase, rental or leasing and installation of machin	nery and equipment		s _	0	_ 🗆	\$_	0		
	Construction or leasing of plant buildings and facilit	ties		\$_	0		\$_	0		
	Acquisition of other businesses (including the value this offering that may be used in exchange for the another issuer pursuant to a merger)	the assets or securities of	_	\$	0		\$	0		
	Repayment of indebtedness			\$	0	- 0	\$	0		
	Working capital			\$ - \$	_		\$ -	0		
	Other (Specify): Limited Liability Company Units			\$ - \$		 Ø	\$	459,435,123		
	Column Totals			* – \$		- E	\$ - \$	459,435,123		
Total Payments Listed (column totals added)							459,435,123			
		D. FEDERAL SIGNATUR	RE	_						
fc	The issuer has duly caused this notice to be signed by its indicated by the information furnished by the issuer to an	issuer to furnish to the U.S. Se	ecuriti	ies an	d Exchange Comr	mission,	, upon	er Rule 505, the n written request		
	uer (Print or Type) ntobel: Non-US Equity LLC	Signature			Date December 7, 20	107	,, , 			
	• •	Title of Signer (Print or Type) Assistant Secretary of the Issue	ier's l	Mans	iging Member					

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).

END